RESPONSE TO

CASE MANAGEMENT REVIEW
NORTHWEST REGION

SEPTEMBER, 1984

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BACKGROUND

The Case Management Review and Report conducted by Dr. Thomlison were prepared at the request of the Minister, Social Services and Community Health. The terms of reference, as detailed in the Report acknowledged the concern regarding the case management procedures and practices in the Richard Cardinal case and, more generally, with permanent and temporary wards.

The Government's commitment to the proclamation of the Child Welfare Act represents a major opportunity to undertake a fundamental review of child welfare, ensuring the presence of effective case management practices and procedures and a rational and cohesive delivery system. A Child Welfare Implementation Steering Committee has been appointed to accomplish the following major goals:

a. Assure the design, development and implementation of a children's services system that will support and realize the principles, intents and requirements of the new Child Welfare Act.

b. Develop the regulations required to administer the new legislation.

c. Ensure that those regulations and delivery system components that are essential for the basic administration of the new act are implemented by June 30, 1985.

d. Ensure that the process of design, development and implementation is undertaken in a manner that is consistent with a philosophy of:

- effective and efficient service provision to children and their families, supported by good management, planning and evaluation.

- participation by a wide cross-section of staff within the department, drawn from both central office and the regions and including the front line level.

- consultation with the groups and interested parties affected by the changes.

- the intent and practice of decentralization and delegated decision making within the department.

There is a commitment to ensure that all groups and interested parties, both internal and external, have an opportunity to be heard during the course of the implementation project.

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The scope of the Child Welfare Implementation Project is as broad and extensive as the child welfare system itself, and will encompass all aspects of the administration of the Child Welfare Act and the provision of services and programs to children. The enactment of this major piece of legislation sets the direction and provides the foundation for the comprehensive restructuring of the child welfare system in Alberta.

The response to Dr. Thomlison's recommendations represents commitment to addressing the diverse factors which contributed to the inadequate management of Richard Cardinal's case. It is recognized, however, that continued development of programs and services can not always avert all tragedies.

Guardianship and care responsibilities for children must be exercised in partnership with families, community agencies and resources, mental health professionals and the other organizations concerned with the welfare of children. The objective is to work together, with the mutual and strong goal of providing responsive and sensitive care to children and their families.

RESPONSE TO RECOMMENDATIONS

The response to Dr. Thomlison's Recommendation #1, provides a basis for the response to all of the recommendations.

RECOMMENDATION #1

That the Department of Social Services and Community Health demonstrate through particular program action its declared commitment to child welfare.

A new Child Welfare Act is only a foundation upon which to demonstrate this commitment. Development of supporting child welfare programs and resources will be the measure of the department's priority. It is my opinion that the department is now in a position to implement many of the policies, standards, and programs that are anticipated under the new Child Welfare Act. This should be done as soon as possible.

RESPONSE

The Government of Alberta is committed to child welfare as a major priority for Social Services and Community Health.

The Government is committed to the plan of decentralization of authority based on the belief that decentralization is the best way to meet the unique and special needs of the children and families of Alberta.

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The implementation of the new Child Welfare Act in July, 1985 and associated services will result in initiatives that reflect commitment to child welfare:

- A review of both central and regional organizations is being undertaken to ensure that the commitment to child welfare is reinforced by structure, practices and resources. Major initiatives will be implemented by July, 1985. In the interim, guidelines on case management practices addressed in this report will be distributed to child welfare workers as soon as possible.

- The new Child Welfare Act will establish a Children's Guardian in Alberta. The Guardian will exercise guardianship responsibilities for temporary and permanent wards in the province with equal attention, will monitor the care and treatment of children in care under guardianship and advocate to achieve the best interest of children. The authority of the Guardian will be exercised independently of the care-giving system, reporting directly to the Deputy Minister of Social Services. Assistance will be provided by Regional Children's Guardians in each region of the province.

- A major initiative has been undertaken to further develop children's mental health services in Alberta. This initiative will address the issue of availability of treatment services for children of Richard Cardinal's age. The development of a system of children's mental health services is considered a priority and is essential to ensure effective assessment and treatment services for children. The system of children's mental health services will be discussed with appropriate community organizations and professionals.

- Implementation of a computerized Child Welfare Information System is currently in pilot phase in a district office in each region and has the capability to track and monitor date of admission; expected date of discharge; actual date of discharge; date of next review of the case, and to alert management on the frequency pattern of placements within the district office, region and province.

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A. IMMEDIATE ACTION RESPONSES

The following recommendations will be addressed immediately.

RECOMMENDATION #2

That the Department of Social Services and Community Health must immediately examine the care of those children who are permanent wards within both the Northwest and Edmonton Regions.

RESPONSE

An immediate review will examine the care of those children who are permanent wards within both the Northwest and Edmonton regions. The review will be undertaken in cooperation with child welfare workers who are responsible for the care of these children, and will be completed by December 31, 1984. The recommendations from the review will be implemented as quickly as possible.

The Child Welfare Programs manual will be amended to clarify casework responsibilities for the care of permanent wards.

In addition, a review will be undertaken to examine the care of all permanent and temporary wards in the four other regions. The approach and terms of reference for the review will be completed by October 31, 1984.

RECOMMENDATION #4

That the Department of Social Services and Community Health move immediately to establish and fund programs in the Northwest Region to assist adolescent wards in preparing for independence from the department.

RESPONSE

There are Supported Independent Living programs designed to assist children in care during the transition period to independence. The Regional Director, staff and community representatives will ensure that such a program is implemented in the Northwest Region.

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RECOMMENDATION #7

That the Department of Social Services and Community Health must identify the means by which caseworkers in the Northwest Region, Barrhead Office can be assisted to develop a higher quality of casework planning and action.

RESPONSE

Departmental officials will develop the means to work with the Barrhead caseworkers to improve quality of casework planning and action. This will include an evaluation of current practices and means to improve these practices. This will be done in consultation with Barrhead District Office caseworkers.

RECOMMENDATION #9

That the Department of Social Services and Community Health examine immediately the low staff morale and high turnover of staff in the Barrhead District Office.

RESPONSE

The Regional Director, Northwest Region is addressing the issue of morale with the Barrhead District Office staff.

Social workers often prefer an urban setting rather than a rural setting. Recruiting and maintaining qualified child welfare workers in the northern regions of the province requires ongoing and concerted efforts. Resources and support will be provided to the northern regions to address this problem.

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RECOMMENDATION #20

That the senior administration of the Department of Social Services and Community Health clarify immediately its position on the question of regional autonomy versus central control. Specific reference must be given to such issues as budget control, policy formulation, decision making and standard setting for service delivery.

RESPONSE

In the decentralized system of service delivery in place, program formulation and the establishment of program standards is the responsibility of central office; case related decision making and budget control is the responsibility of the regions.

A clear statement on the issue of regional autonomy versus central control will be circulated by the Deputy Minister, Social Services.

B. RESPONSE TO RECOMMENDATIONS TO IMPROVE CASE MANAGEMENT AND SUPERVISION.

RECOMMENDATION #8

That the Department of Social Services and Community Health formulate a statement of procedures to enhance the transfer of a case from one worker to the next.

RESPONSE

A clear statement of procedures for case transfer will be included in the Child Welfare Programs manual. Monitoring of these procedures will be the responsibility of the district office and region

RECOMMENDATION #11

That the Department of Social Services and Community Health re-evaluate its procedures for the assignment of caseloads, taking into account the variation and complexity of children's problems and the variation in level of competence and expertise of its social workers.

Often caseload problems are viewed solely in terms of the actual number of cases for which a social worker is responsible. Greater attention should be placed on matching worker expertise and competence with the nature and complexity of the child's problems.

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RESPONSE

A review of caseload size is being undertaken to ensure that adequate resources are assigned to meet the expectation that case loads are effectively managed by child welfare workers. Strong casework supervision is critical to successful case management. Supervisory needs including the assignment and management of caseloads will be assessed.

The review will recognize that caseload assignment should take into account the varying levels of case complexity.

RECOMMENDATION #12

That the Department of Social Services and Community Health appoint an external consultant knowledgeable in the area of child welfare casework supervision to assess the supervisory needs of the Northwest Region social workers. To bring forward recommendations which will assist the department in elaborating and clarifying the role of the social work supervisor.

It is my opinion that a person external to the department would be in a better position to gather an accurate perspective on the supervisory needs of the social workers.

RESPONSE

The supervisory needs of social workers will be addressed by senior personnel within the Department of Social Services and Community Health.

RECOMMENDATION #14

That the Department of Social Services and Community Health examine the appropriateness of the social worker-supervisor relationship model known as a "social work team."

RESPONSE

The various systems of social work supervision including working as a social work team will be examined and the most effective means will be incorporated within the training and practices of case work supervisors.

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RECOMMENDATION #23

That the Department of Social Services and Community Health identify the reason(s) which inhibit the social workers' compliance with the required frequency of completing the "Review of Child's Progress" reports. Such a review should address procedures and technology which would assist the social workers in completing this responsibility.

RESPONSE

The Child Welfare Implementation Project is ensuring that the internal review of case management procedures and practices include an analysis of the factors that inhibit social workers' apparent compliance with completing forms including the "Review of Child's Progress" form. This review will include development of procedures and supportive technology to accommodate this requirement and other form completion requirements.

C. RESPONSE TO RECOMMENDATIONS TO IMPROVE TREATMENT SERVICES

RECOMMENDATION #6

That the Department of Social Services and Community Health develop a wider range of alternate care resources.

RESPONSE

A review of alternate care resources is underway, with the objective of providing sufficient alternate care resources for children in all regions.

Treatment care alternatives for children will be addressed as part of the evaluation and further development of children's mental health services.

RECOMMENDATION #5

That the Department of Social Services and Community Health develop a statement and a set of criteria for the recognition of a child at risk. This should be accompanied by a clear statement of procedures for helping such children.

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RESPONSE

The Child Welfare Programs manual primarily reflects the policy and procedures in the child welfare system. Criteria for children at risk of suicide and procedures for helping such children will be developed in cooperation with the provincial suicidologist and will be implemented as soon as possible.

RECOMMENDATION #19

That the Department of Social Services and Community Health evaluate its policy and procedures governing referral to private consultants for assessment and treatment of children under its care.

RESPONSE

This recommendation affects the professions of social work, psychology and psychiatry. Assistance of all three professional bodies in the province, will be requested in clarifying relationships, policies, and guidelines for interdisciplinary collaboration in instances when children in the care of the department are referred for assessment and treatment.

The recommendation will be incorporated within the terms of reference for the further development of the system of children's mental health services.

D. RESPONSE TO RECOMMENDATIONS TO IMPROVE MONITORING AND REVIEW PRACTICES

RECOMMENDATION #3

That the Department of Social Services and Community Health establish a temporary and permanent ward review procedure which would insure that the care of all permanent wards is monitored and evaluated at least once per year.

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RESPONSE

The development of a review procedure is underway to monitor and evaluate the care of all permanent wards at least once per year.

This is being accomplished by reviewing and modifying the regional monitoring systems to ensure that the systems are effective and the elements to be monitored are based on accepted principles of social work practice. The resources and structure to support the monitoring activity will be incorporated within the regional and central office structure.

RECOMMENDATION #21

That the Department of Social Services and Community Health commit itself to establishing a system of program standards and guidelines. The first system of standards and guidelines should be developed in relation to casework practices with permanent wards.

RESPONSE

Several months ago, work commenced on developing program standards and guidelines for child welfare services to reflect the requirements of the new Child Welfare Act. This work is being done within the context of the Child Welfare Implementation Project.

Priority is being given to the clarification of standards and guidelines in relation to casework practice with permanent wards.

RECOMMENDATION #22

That the Department of Social Services and Community Health clarify the expectations and responsibilities on the internal monitoring of casework activity with the children in its care.

RESPONSE

A standardized two-level regional monitoring system will be in place prior to the implementation of the new Child Welfare Act. Monitoring responsibilities of casework supervisors and managers and that of the regional management will be included. These responsibilities will be included in departmental guidelines and procedures and reinforced in departmental inservice training programs.

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Pending the establishment of the standardized regional monitoring system, the responsibility of casework supervisors and district office managers for monitoring will be reinforced.

RECOMMENDATION #24

That the Department of Social Services and Community Health develop a case audit procedure. Such a procedure would ensure periodic external examination of the quality of service being delivered to children in the care of the department.

RESPONSE

Case audits are the primary responsibility of the casework supervisor. However, no standardized procedure for regular case audits is presently in place. As a result, the practice of case audits is inconsistently applied across the child welfare system

A clear expectation regarding case audits and a standardized procedure for undertaking them will be established in policy and will be reinforced in the casework supervisor's training program.

The Children's Guardian and the Regional Children's Guardians will monitor the care provided to temporary and permanent wards on a regular basis.

RECOMMENDATION #25

That the Department of Social Services and Community Health re-evaluate its quality review objectives and procedures. In this re-evaluation, consideration must be given to the participation of at least one member of the review committee being external (independent) from the Department of Social Services.

RESPONSE

A system of operational review to ensure compliance to policies and procedures is being developed including an evaluation of the operational review practices underway to ensure that periodic reviews occur along with the necessary follow-up action. External representative(s) will be appointed to the review process as appropriate.

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E. RESPONSE TO RECOMMENDATIONS TO STAFF TRAINING AND STAFF APPRAISAL

RECOMMENDATION #10

That the Department of Social Services and Community Health re-examine its position on both academic and in-service training, with a view to:

(a) reiterating its commitment to professional social work education and actively encouraging staff in the Northwest Region to pursue the Bachelor of Social Work degree;

(b) mounting in-service programs on social work with Native peoples, taught by persons with knowledge and experience in working with Native peoples;

(c) mounting in-service training programs on child abuse identification and intervention; and

(d) contracting with the Suicide Prevention and Training Program to train in the recognition of the indicators of suicide and methods of intervention.

RESPONSE

- In 1981, the Department established the Bachelor of Social Work Degree as the basic educational qualification for Child Welfare Workers in Alberta. A major recruitment drive was undertaken across Canada, resulting in a significant increase in the number of trained professionals in Alberta's Child Welfare system.

  At the same time, an educational leave program was implemented with provisions for existing staff to return to school and upgrade their qualifications to Bachelor of Social Work and Master of Social Work levels. To date 98 staff, from all levels, have received educational leave; 89 have completed their professional degrees as a result of this program; 9 will complete their degrees in 1985.

- A bursary program, to assist social work students who would, in turn, join Alberta's child welfare system on graduation was also initiated. Between 1981 and 1984, 55 department child welfare workers and 61 others were granted bursaries.

  As a result of these initiatives, the department has been able to attract many dedicated professionals in the past three years, and has also been able to upgrade the professional training of a significant number of committed staff already working in the department.

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The educational leave and bursary programs is available to staff to support them in the achievement of a professional degree.

- The department developed a native awareness in-service training program available through its Staff Development Branch. It was provided on a pilot basis with two sessions held to date. A total of 39 staff participated. Priority will be given to expanding this program to ensure that all social workers who work with native families receive this training.

- In addition a 2-day program in the Identification of Maltreated Children has been implemented. This program is aimed at social work staff in non-child welfare caseloads, yet who regularly contact families. Ninety staff have attended this program, one more course will be offered by December 31, 1984.

In 1981, an in-service training program for child welfare staff was implemented with the assistance of the American Humane Association. After two years, the department assumed responsibility for this program and has continued it to date. The program focuses on the child protection process and detailed information on child abuse identification and intervention skills. It is three weeks in duration.

To date, 765 departmental staff have completed this program and an additional 91 staff are scheduled to take the course this fall.

Also, a program was developed to provide specialized training in investigation, screening and monitoring of foster parent applicants. This course is three days in length. It was offered to all regions as well as members of the management team. A total of 86 participants have completed the course.

- Since the department employs Canada's only provincial suicidologist for purposes of providing information and training to the public in the area of suicide prevention this recommendation will be reviewed with the objective of implementing the most appropriate suicide prevention training for staff.

The department's three week training program in Child Protective Services places special emphasis on the investigation of child neglect and abuse. Aside from covering methods of investigation and the gathering of evidence and assessment information, the program covers the use of medical and law enforcement personnel in neglect and abuse situations. Police involvement is now mandatory in certain situations. The content of the training has been revised on several occasions to ensure consistency with current standards and social work practice. Currently more than 20 department staff members are involved as part-time trainers in the delivery of the program.

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RECOMMENDATION #13

That the Department of Social Services and Community Health provide educational opportunities for supervisors to improve their knowledge of contemporary social work practice in the child welfare field, as well as to improve their skills and knowledge in the methods of supervision.

RESPONSE

The educational opportunities available for supervisors will be examined to ensure that this recommendation is addressed.

RECOMMENDATION #26

That the Department of Social Services and Community Health develop a system of staff appraisal based on casework performance indicators.

RESPONSE

At present, an up-dated description of the role of child welfare workers and casework supervisors is being completed within the context of the Child Welfare Implementation Project. These descriptions will include a specific list of casework and case management responsibilities, and performance standards that outline departmental expectations.

A standardized system of staff appraisal is in place. The updated responsibilities and performance standards will be included in the current system.

F. RESPONSE TO RECOMMENDATIONS TO IMPROVE THE RELATIONSHIP BETWEEN DEPARTMENT AND COMMUNITY AGENCIES AND PROFESSIONALS

RECOMMENDATION #15

That the Department of Social Services and Community Health strike a task force made up of members of the Foster Parents Association and departmental staff, supplemented by knowledgeable external resources people when needed, to examine the causes of foster home placement breakdown. This task force must bring forward recommendations to improve the probability of foster home placement success.

RESPONSE

Approaches will be determined in consultation with the Alberta Foster Parents Association and the native community to develop methods to improve foster home placement success.

RECOMMENDATION #16

In addition to other suggestions for strengthening foster home placements, the task force give consideration to a recommendation that foster parents and the department enter into a system of formalized service contracting. Such contracts would include statements of mutual responsibilities with clear statements of future planning for the child.

RESPONSE

The response to this recommendation will be addressed as part of the ongoing discussions with the Foster Parents Association.

RECOMMENDATION #17

That the Department of Social Services and Community Health examine its current relationship with significant community resources with a view to recommending means by which (a) communication can be improved, (b) greater interdisciplinary collaboration can occur, (c) greater interdisciplinary decision-making can occur.

RESPONSE

A good relationship with community resources is essential to providing professional services to children and families. It is recognized that relationships with community agencies vary significantly across the province.

Greater use of interdisciplinary teams to assist the child welfare staff in managing difficult cases will be encouraged. This includes collaboration with professions such as, psychology, psychiatry, nursing and education.

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RECOMMENDATION #18

That the Department of Social Services and Community Health prepare a statement of guidelines to enhance the social workers' liaison with the school programs in which their wards are enrolled.

RESPONSE

Direction will be provided to improve social workers liaison with school programs. The relationship with school programs is an important component in providing child welfare services.

Department of Social Services and Community Health in conjunction with Alberta Education and the Alberta School Trustees Association, has already undertaken discussions to develop a policy guideline on the school/child welfare relationship. While clear direction at the policy level is important, it is also acknowledged that the critical component for the child is the relationship between his social worker and his school. This point will be reinforced in our in-service training program for child welfare workers and child welfare supervisors.

RECOMMENDATION #27

That the Department of Social Services and Community Health establish, as soon as possible, a task force comprised of equal representation from the Metis and Indian communities and Social Services personnel, who have had direct work experience within the Metis and Indian communities, supplemented by knowledgeable resource people as needed, to collaborate on the exploration of Metis and Indian child welfare issues, and to recommend program alternatives for Metis and Indian children within the Northwest Region.

RESPONSE

Consultation will occur with the native community, the Department of Indian and Northern Affairs and Alberta Native Affairs regarding this recommendation. The commitment to consultation and cooperation with these association is already reflected in the Lesser Slave Lake and Blackfoot agreements. These agreements provide the authority for band councils to deliver their own child welfare services.